

Fill in this information to identify the case and this filing:

Debtor Name Prescriptive Fitness & Nutrition, LLC  
United States Bankruptcy Court for the: Western District of NC  
(State)  
Case number (if known): 18-50481

## Official Form 202

### Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

#### Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets—Real and Personal Property (Official Form 206A/B)*
- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)*
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)*
- Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)*
- Schedule H: Codebtors (Official Form 206H)*
- Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)*
- Amended Schedule* \_\_\_\_\_
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)*
- Other document that requires a declaration* \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 08/22/2018  
MM / DD / YYYY

X

/s/ Kevin Craft

Signature of individual signing on behalf of debtor

Kevin Craft

Printed name

Member / Manager

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Prescriptive Nutrition & Fitness, LLC  
United States Bankruptcy Court for the: Western District of NC  
(State)  
Case number (if known): 18-50481

Check if this is an amended filing

## Official Form 206A/B

### Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

#### Part 1: Cash and cash equivalents

##### 1. Does the debtor have any cash or cash equivalents?

No. Go to Part 2.  
 Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

\$ 200.00

##### 2. Cash on hand

##### 3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)

3.1. Bank of America

Type of account

Operating

Last 4 digits of account number

5 6 6 4

\$ 3,441.49

3.2. Bank of America

Payroll

5 2 5 3

\$ 1,040.38

##### 4. Other cash equivalents (Identify all)

4.1. \_\_\_\_\_

\$ \_\_\_\_\_

4.2. \_\_\_\_\_

\$ \_\_\_\_\_

##### 5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$ 4,681.87

#### Part 2: Deposits and prepayments

##### 6. Does the debtor have any deposits or prepayments?

No. Go to Part 3.  
 Yes. Fill in the information below.

Current value of debtor's interest

##### 7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1. Duke Power

\$ 3,000.00

7.2. MotionSoft

\$ 12,000.00

**8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1. \_\_\_\_\_

\$ \_\_\_\_\_

8.2. \_\_\_\_\_

\$ \_\_\_\_\_

**9. Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$ 15,000.00

**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?** No. Go to Part 4. Yes. Fill in the information below.**Current value of debtor's interest****11. Accounts receivable**

11a. 90 days old or less: \_\_\_\_\_ - face amount \_\_\_\_\_ doubtful or uncollectible accounts \_\_\_\_\_ = ..... → \$ \_\_\_\_\_

11b. Over 90 days old: \_\_\_\_\_ - face amount \_\_\_\_\_ doubtful or uncollectible accounts \_\_\_\_\_ = ..... → \$ \_\_\_\_\_

**12. Total of Part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ 0.00

**Part 4: Investments****13. Does the debtor own any investments?** No. Go to Part 5. Yes. Fill in the information below.**Valuation method used for current value****Current value of debtor's interest****14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1. \_\_\_\_\_ \$ \_\_\_\_\_  
14.2. \_\_\_\_\_ \$ \_\_\_\_\_**15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**

Name of entity:

% of ownership:

15.1. \_\_\_\_\_ % \$ \_\_\_\_\_  
15.2. \_\_\_\_\_ % \$ \_\_\_\_\_**16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**

Describe:

16.1. \_\_\_\_\_ \$ \_\_\_\_\_  
16.2. \_\_\_\_\_ \$ \_\_\_\_\_**17. Total of Part 4**

Add lines 14 through 16. Copy the total to line 83.

\$ 0.00

**Part 5: Inventory, excluding agriculture assets****18. Does the debtor own any inventory (excluding agriculture assets)?** No. Go to Part 6. Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
<b>19. Raw materials</b>	MM / DD / YYYY	\$ _____	_____	\$ _____
<b>20. Work in progress</b>	MM / DD / YYYY	\$ _____	_____	\$ _____
<b>21. Finished goods, including goods held for resale</b>	MM / DD / YYYY	\$ _____	_____	\$ _____
<b>22. Other inventory or supplies</b>	MM / DD / YYYY	\$ _____	_____	\$ _____
<b>23. Total of Part 5</b>				\$ 0.00

Add lines 19 through 22. Copy the total to line 84.

**24. Is any of the property listed in Part 5 perishable?** No  
 Yes**25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?** No  
 Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \_\_\_\_\_**26. Has any of the property listed in Part 5 been appraised by a professional within the last year?** No  
 Yes**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)****27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?** No. Go to Part 7. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
<b>28. Crops—either planted or harvested</b>	\$ _____	_____	\$ _____
<b>29. Farm animals</b> Examples: Livestock, poultry, farm-raised fish	\$ _____	_____	\$ _____
<b>30. Farm machinery and equipment</b> (Other than titled motor vehicles)	\$ _____	_____	\$ _____
<b>31. Farm and fishing supplies, chemicals, and feed</b>	\$ _____	_____	\$ _____
<b>32. Other farming and fishing-related property not already listed in Part 6</b>	\$ _____	_____	\$ _____

## 33. Total of Part 6.

Add lines 28 through 32. Copy the total to line 85.

\$ 0.00

## 34. Is the debtor a member of an agricultural cooperative?

 No Yes. Is any of the debtor's property stored at the cooperative? No Yes

## 35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

 No Yes. Book value \$ \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \$ \_\_\_\_\_

## 36. Is a depreciation schedule available for any of the property listed in Part 6?

 No Yes

## 37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

 No Yes**Part 7: Office furniture, fixtures, and equipment; and collectibles**

## 38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

 No. Go to Part 8. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture See Attached Schedule	\$ _____	_____	\$ 2,420.00
40. Office fixtures	\$ _____	_____	\$ _____
41. Office equipment, including all computer equipment and communication systems equipment and software	\$ _____	_____	\$ _____
42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles	\$ _____	_____	\$ _____
42.1 _____	\$ _____	_____	\$ _____
42.2 _____	\$ _____	_____	\$ _____
42.3 _____	\$ _____	_____	\$ _____

## 43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$ 2,420.00

## 44. Is a depreciation schedule available for any of the property listed in Part 7?

 No Yes

## 45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

 No Yes

**Part 8: Machinery, equipment, and vehicles****46. Does the debtor own or lease any machinery, equipment, or vehicles?**

No. Go to Part 9.  
 Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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**47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles**

47.1 2005 H2 Hummer	\$ 9,750.00	NADA	\$ 9,750.00
47.2	\$		\$
47.3	\$		\$
47.4	\$		\$

**48. Watercraft, trailers, motors, and related accessories** Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

48.1	\$		\$
48.2	\$		\$

**49. Aircraft and accessories**

49.1	\$		\$
49.2	\$		\$

**50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

See Attached Schedule \$ 85,850.00

**51. Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$ 95,600.00

**52. Is a depreciation schedule available for any of the property listed in Part 8?**

No  
 Yes

**53. Has any of the property listed in Part 8 been appraised by a professional within the last year?**

No  
 Yes



**Part 9: Real property****54. Does the debtor own or lease any real property?** No. Go to Part 10. Yes. Fill in the information below.**55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 191B West Plaza Dr.	Lease	\$ 0.00		\$ 0.00
55.2 Mooresville, NC 28117		\$		\$
55.3		\$		\$
55.4		\$		\$
55.5		\$		\$
55.6		\$		\$

**56. Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ 0.00

**57. Is a depreciation schedule available for any of the property listed in Part 9?** No Yes**58. Has any of the property listed in Part 9 been appraised by a professional within the last year?** No Yes**Part 10: Intangibles and intellectual property****59. Does the debtor have any interests in intangibles or intellectual property?** No. Go to Part 11. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets	\$		\$
61. Internet domain names and websites	\$		\$
62. Licenses, franchises, and royalties Gold's Gym	\$ 25,000.00		\$ 25,000.00
63. Customer lists, mailing lists, or other compilations Members	\$ Unknown		\$ Unknown
64. Other intangibles, or intellectual property	\$		\$
65. Goodwill	\$		\$
66. Total of Part 10.			\$ 25,000.00

Add lines 60 through 65. Copy the total to line 89.

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

No  
 Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

No  
 Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

No  
 Yes

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

No. Go to Part 12.  
 Yes. Fill in the information below.

Current value of  
debtor's interest

71. Notes receivable

Description (include name of obligor)

— Total face amount — →  \$

doubtful or uncollectible amount

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

Tax year  \$   
 Tax year  \$   
 Tax year  \$

73. Interests in insurance policies or annuities

\$

74. Causes of action against third parties (whether or not a lawsuit has been filed)

\$

Nature of claim

Amount requested \$

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

\$

Nature of claim

Amount requested \$

76. Trusts, equitable or future interests in property

\$

77. Other property of any kind not already listed *Examples:* Season tickets, country club membership

\$

\$

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$  0.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

No  
 Yes

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$ 4,681.87	
81. Deposits and prepayments. Copy line 9, Part 2.	\$ 15,000.00	
82. Accounts receivable. Copy line 12, Part 3.	\$ 0.00	
83. Investments. Copy line 17, Part 4.	\$ 0.00	
84. Inventory. Copy line 23, Part 5.	\$ 0.00	
85. Farming and fishing-related assets. Copy line 33, Part 6.	\$ 0.00	
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$ 2,420.00	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$ 95,600.00	
88. Real property. Copy line 56, Part 9. . . . .	\$ 25,000.00	\$ 0.00
89. Intangibles and intellectual property. Copy line 66, Part 10.		
90. All other assets. Copy line 78, Part 11.	+ \$ 0.00	
91. Total. Add lines 80 through 90 for each column. 91a.	\$ 142,701.87	+ 91b. \$ 0.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.		\$ 142,701.87

Fill in this information to identify the case:

Debtor name Prescriptive Fitness & Nutrition, LLC  
 United States Bankruptcy Court for the: Western District of NC  
 (State)  
 Case number (if known): 18-50481

Check if this is an amended filing

## Official Form 206D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.  
 Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
--	--

<b>2.1</b> Creditor's name <u>First National Bank</u>	<b>Describe debtor's property that is subject to a lien</b> <u>All property</u>	<u>\$ 300,000.00</u>	<u>\$ 142,701.87</u>
<b>Creditor's mailing address</b> <u>One North Shore Center</u> <u>Pittsburgh, PA 15212</u>	<hr/>		
<b>Creditor's email address, if known</b> <hr/>	<b>Describe the lien</b> <u>UCC No. 20150104841H</u>		
<b>Date debt was incurred</b> <u>Nov. 5, 2015</u>	<b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<b>Last 4 digits of account number</b> <hr/>	<b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
<b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority. <hr/>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<b>2.2</b> Creditor's name <hr/>	<b>Describe debtor's property that is subject to a lien</b> <hr/>		
<b>Creditor's mailing address</b> <hr/>	<hr/>		
<b>Creditor's email address, if known</b> <hr/>	<b>Describe the lien</b> <hr/>		
<b>Date debt was incurred</b> <hr/>	<b>Is the creditor an insider or related party?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes		
<b>Last 4 digits of account number</b> <hr/>	<b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
<b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <hr/>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<hr/>	<hr/>		
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<hr/>		
<b>3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.</b>		<u>\$ 300,000.00</u>	

Fill in this information to identify the case:

Debtor	Prescriptive Nutrition & Fitness, LLC		
United States Bankruptcy Court for the:	Western	District of	NC
Case number (If known)	18-50481		

Check if this is an amended filing

## Official Form 206E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

#### Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.  
 Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	<p>Priority creditor's name and mailing address  Internal Revenue Service (NPO)</p> <p>Central Insolvency Operation  P.O. Box 7346, Philadelphia, PA 19101-7346</p> <p>Date or dates debt was incurred  3rd Q 2017</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)</p>	<p>As of the petition filing date, the claim is: \$ 14,015.34  Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: 941 Tax</p> <p>Is the claim subject to offset?  <input type="checkbox"/> No  <input type="checkbox"/> Yes</p>	\$ 14,015.34
2.2	<p>Priority creditor's name and mailing address  North Carolina Department of Revenue (NPO)</p> <p>P.O. Box 871  Raleigh, NC 27602</p> <p>Date or dates debt was incurred  2018</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)</p>	<p>As of the petition filing date, the claim is: \$ 1,000.00  Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Sales Tax</p> <p>Is the claim subject to offset?  <input type="checkbox"/> No  <input type="checkbox"/> Yes</p>	\$ 1,000.00
2.3	<p>Priority creditor's name and mailing address  Iredell County Tax Office (NPO)</p> <p>135 E. Water Street  Statesville, NC 28677</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)</p>	<p>As of the petition filing date, the claim is: \$ 0.00  Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset?  <input type="checkbox"/> No  <input type="checkbox"/> Yes</p>	\$ 0.00

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
<b>3.1</b>	<b>Nonpriority creditor's name and mailing address</b> Bank of America Corporation P.O. Box 15710 Wilmington, DE 19850-5710	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Business Line of Credit Basis for the claim: _____
		\$ 17,963.00
<b>3.2</b>	<b>Nonpriority creditor's name and mailing address</b> Dale Craft 9837 Hilltop Drive Venice, FL 34292	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Business Loan Basis for the claim: _____
		\$ 68,000.00
<b>3.3</b>	<b>Nonpriority creditor's name and mailing address</b> NCESC (NPO) P.O. Box 25903 Raleigh, NC 27611-5903	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  NPO Basis for the claim: _____
		\$ 0.00
<b>3.4</b>	<b>Nonpriority creditor's name and mailing address</b> Gold's Gym Franchising- #0315 4001 Maple Avenue, Suite 200 Dallas, TX 75219	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Franchise Basis for the claim: _____
		\$ 11,000.00
<b>3.5</b>	<b>Nonpriority creditor's name and mailing address</b> BEK Properties, LLC c/o Larry Englert 1250 Revolution Mill Drive, Suite 151 Greensboro, NC 27405	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Commercial Lease Basis for the claim: _____
		\$ 66,000.00
<b>3.6</b>	<b>Nonpriority creditor's name and mailing address</b> Aviator Mastercard Card Services P.O. Box 8801 Wilmington, DE 19899-8801	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Credit Card Basis for the claim: _____
		\$ 50,000.00
		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.7	Nonpriority creditor's name and mailing address  Duke Energy P.O. Box 580192 Charlotte, NC 28201	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 3,600.00
	Date or dates debt was incurred  Last 4 digits of account number	Basis for the claim: Power	
		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3.8	Nonpriority creditor's name and mailing address  PSNC Energy P.O. Box 100256 Columbia, SC	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 0.00
	Date or dates debt was incurred  Last 4 digits of account number	Basis for the claim: Gas (NPO)	
		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3.9	Nonpriority creditor's name and mailing address  Town of Mooresville Water P.O. Box 878 Mooresville, NC 28115	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 0.00
	Date or dates debt was incurred  Last 4 digits of account number	Basis for the claim: Water (NPO)	
		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3.10	Nonpriority creditor's name and mailing address  Nextiva 8800 E. Chaparral Road, Suite 300 Scottsdale, AZ 85250	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 0.00
	Date or dates debt was incurred  Last 4 digits of account number	Basis for the claim: Telephone (NPO)	
		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3.11	Nonpriority creditor's name and mailing address  Continuum P.O. Box 580192 Charlotte, NC 28258	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 0.00
	Date or dates debt was incurred  Last 4 digits of account number	Basis for the claim: Cable (NPO)	
		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 4:****Total Amounts of the Priority and Nonpriority Unsecured Claims****5. Add the amounts of priority and nonpriority unsecured claims.**

	<b>Total of claim amounts</b>
5a. Total claims from Part 1	5a. \$ 15,015.34
5b. Total claims from Part 2	5b. + \$ 216,563.00
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c. \$ 231,578.34

Fill in this information to identify the case:

Debtor name	Prescriptive Fitness & Nutrition, LLC		
United States Bankruptcy Court for the:	Western	District of	NC
Case number (If known):	18-50481	(State)	11
Chapter			

Check if this is an amended filing

## Official Form 206G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest	Commercial Lease	BEK Properties, LLC c/o ABTV, Larry Englert 1250 Revolution Mill Dr. Greensboro, NC 27405
	State the term remaining	26 months	
	List the contract number of any government contract		
2.2	State what the contract or lease is for and the nature of the debtor's interest	Telephone	Nextiva 8800 E. Chaparral Rd., Suite 300 Scottsdale, AZ 85250
	State the term remaining	Indefinite	
	List the contract number of any government contract		
2.3	State what the contract or lease is for and the nature of the debtor's interest	Water	Town of Mooresville P.O. Box 878 Mooresville, NC 28115
	State the term remaining	Indefinite	
	List the contract number of any government contract		
2.4	State what the contract or lease is for and the nature of the debtor's interest	Power	Duke Energy P.O. Box 1090 Charlotte, NC 28201
	State the term remaining	Indefinite	
	List the contract number of any government contract		
2.5	State what the contract or lease is for and the nature of the debtor's interest	Cable	Continuum P.O. Box 580192 Charlotte, NC 28258
	State the term remaining	Indefinite	
	List the contract number of any government contract		

Debtor

Prescriptive Nutrition & Fitness, LLC Case number (if known) 18-50481

Name

**Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.6	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining  List the contract number of any government contract	Gas  Indefinite	PSNC Energy  P.O. Box 100256  Columbia, SC 29202
2.7	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining  List the contract number of any government contract	Gym Members  Varies	Gym Members
2.8	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining  List the contract number of any government contract	Gold's Gym Franchising  12 Months	Gold's Gym Franchising  4001 Maple Ave., Suite 200  Dallas, TX 75219
2.9	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining  List the contract number of any government contract	Billing  Indefinite	Motionsoft  23 Fontana Ln.  Baltimore, MD 21237
2.	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining  List the contract number of any government contract		
2.	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining  List the contract number of any government contract		
2.	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining  List the contract number of any government contract		
2.	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining  List the contract number of any government contract		

Fill in this information to identify the case:

Debtor name Prescriptive Nutrition & Fitness, LLC  
United States Bankruptcy Court for the: Western District of NC  
(State)  
Case number (if known): 18-50481

Check if this is an amended filing

## Official Form 206H

### Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.  
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, *Schedules D-G*. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

	Column 1: Codebtor	Column 2: Creditor	Check all schedules that apply:
2.1	Name <u>Kevin Craft</u> Mailing address <u>126 Chandeleur Dr.</u> <u>Street</u> <u>Mooresville</u> <u>NC</u> <u>28117</u>	Name <u>First National</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2	City <u></u> State <u></u> ZIP Code <u></u>		
2.2	Name <u>Richie Pacella</u> Mailing address <u>851 Blairhill Rd.</u> <u>Street</u> <u>Charlotte</u> <u>NC</u> <u>28217</u>	Name <u>First National</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2	City <u></u> State <u></u> ZIP Code <u></u>		
2.3	Name <u>BEK Properties, LLC</u> Mailing address <u>1250 Revolution Mill Dr.</u> <u>Street</u> <u>Greensboro</u> <u>NC</u> <u>27405</u>	Name <u>First National</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3	City <u></u> State <u></u> ZIP Code <u></u>		
2.4	Name <u>Kevin Craft</u> Mailing address <u>126 Chandeleur Dr.</u> <u>Street</u> <u>Mooresville</u> <u>NC</u> <u>28117</u>	Name <u>Aviator Mastercard</u>	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.4	City <u></u> State <u></u> ZIP Code <u></u>		
2.5	Name <u></u> Mailing address <u>Street</u> <u></u>		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.5	City <u></u> State <u></u> ZIP Code <u></u>		
2.6	Name <u></u> Mailing address <u>Street</u> <u></u>		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.6	City <u></u> State <u></u> ZIP Code <u></u>		

Fill in this information to identify the case:

Debtor name	Prescriptive Nutrition & Fitness, LLC		
United States Bankruptcy Court for the:	Western	District of	NC
Case number (If known):	18-50481		

Check if this is an amended filing

## Official Form 206Sum

### Summary of Assets and Liabilities for Non-Individuals

12/15

#### Part 1: Summary of Assets

##### 1. Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)

###### 1a. Real property:

Copy line 88 from Schedule A/B.....

\$ 0.00

###### 1b. Total personal property:

Copy line 91A from Schedule A/B.....

\$ 142,701.87

###### 1c. Total of all property:

Copy line 92 from Schedule A/B.....

\$ 142,701.87

#### Part 2: Summary of Liabilities

##### 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)

Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D.....

\$ 300,000.00

##### 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)

###### 3a. Total claim amounts of priority unsecured claims:

Copy the total claims from Part 1 from line 5a of Schedule E/F.....

\$ 15,015.34

###### 3b. Total amount of claims of nonpriority amount of unsecured claims:

Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F.....

+ \$ 216,563.00

##### 4. Total liabilities.....

Lines 2 + 3a + 3b

\$ 231,578.34

Fill in this information to identify the case:

Debtor name PRESCRIPTIVE NUTRITION & FITNESS, LLC  
United States Bankruptcy Court for the: WESTERN District of NC  
(State)  
Case number (if known): 18-50481

Check if this is an amended filing

## Official Form 207

### Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

#### Part 1: Income

##### 1. Gross revenue from business

None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

From the beginning of the fiscal year to filing date:

From 01/01/2018  
MM/DD/YYYY

to Filing date

Sources of revenue  
Check all that apply

Gross revenue  
(before deductions and exclusions)

Operating a business  
 Other \_\_\_\_\_

\$ 398,351.31

For prior year:

From 01/01/2017  
MM/DD/YYYY

to 12/31/2017

Operating a business  
 Other \_\_\_\_\_

\$ 790,201.26

For the year before that:

From 01/01/2016  
MM/DD/YYYY

to 12/31/2016

Operating a business  
 Other \_\_\_\_\_

\$ 838,403

##### 2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. Non-business income may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None

Description of sources of revenue

Gross revenue from each source  
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From MM / DD / YYYY to Filing date \_\_\_\_\_

\$ \_\_\_\_\_

For prior year:

From MM / DD / YYYY to MM / DD / YYYY

\_\_\_\_\_ \$ \_\_\_\_\_

For the year before that:

From MM / DD / YYYY to MM / DD / YYYY

\_\_\_\_\_ \$ \_\_\_\_\_

Debtor Prescriptive Nutrition & Fitness, LLC Case number (if known) 18-50481

**Part 2: List Certain Transfers Made Before Filing for Bankruptcy**

**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. Duke Power	4/23	\$ 11,824.88	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other _____
Creditor's name P.O. Box 1090	6/8		
Street Charlotte NC 28201	6/21		
City State ZIP Code	7/19		
3.2.		\$ _____	
Creditor's name			
Street			
City State ZIP Code			

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. Dale Craft		\$ _____	See Attached Schedule 4.1
Insider's name 9837 Hilltop Dr.			Business Loan
Street			
Venice FL 34292			
City State ZIP Code			

**Relationship to debtor**

4.2. Kevin Craft		\$ _____	See Attached Schedule 4.2
Insider's name 126 Chandeleur Dr			Salary
Street			
Mooresville NC 28117			
City State ZIP Code			

**Relationship to debtor**

Member / Manager

**SCHEDULE 4.1**



## Mooresville: Account Activity

Balance Summary:\$359.20 (available as of today 08/22/2018)  
View:today 08/22/2018

### All Transactions

Date	Description	Status	Amount	Available Balance
05/17/2018	Wire Transfer Fee	C	-30.00	
05/17/2018	WIRE TYPE:WIRE OUT DATE:180517 TIME:1213 ET [REDACTED] SERVICE...	C	-5,025.00	
04/09/2018	Wire Transfer Fee	C	-15.00	
04/06/2018	WIRE TYPE:WIRE IN DATE: 180406 TIME:1233 ET TRN:2018040601/580043SEQ:30/000801...	C	8,000.00	
03/13/2018	Wire Transfer Fee	C	-30.00	
03/13/2018	WIRE TYPE:WIRE OUT DATE:180313 TIME:1513 ET [REDACTED] SERVICE...	C	-20,000.00	
02/20/2018	Wire Transfer Fee	C	-30.00	
02/20/2018	WIRE TYPE:WIRE OUT DATE:180220 TIME:1233 ET TRN:2018022001/580043SEQ:15/000311...	C	-4,000.00	
02/15/2018	Wire Transfer Fee	C	-15.00	
02/14/2018	WIRE TYPE:WIRE IN DATE: 180214 TIME:1213 ET [REDACTED] SEQ:15/000311...	C	4,000.00	
12/04/2017	Wire Transfer Fee	C	-15.00	
12/01/2017	WIRE TYPE:WIRE IN DATE: 171201 TIME:0959 ET [REDACTED] SEQ:2/000100...	C	5,000.00	
09/11/2017	Wire Transfer Fee	C	-15.00	
09/08/2017	WIRE TYPE:WIRE IN DATE: 170908 TIME:1214 ET [REDACTED] SEQ:13/000695...	C	8,000.00	
08/28/2017	Wire Transfer Fee	C	-15.00	
08/25/2017	WIRE TYPE:WIRE IN DATE: 170825 TIME:1300 ET [REDACTED] SEQ:16/000931...	C	8,000.00	
08/18/2017	WIRE TYPE:WIRE OUT DATE:170818 TIME:1658 ET [REDACTED] SERVICE...	C	-8,000.00	
08/14/2017	Wire Transfer Fee	C	-15.00	

Date	Description	Status	Amount	Available Balance
08/11/2017	WIRE TYPE:WIRE IN DATE: 170811 TIME:1144 ET [REDACTED] SEQ:23/000463...	C	8,000.00	
06/30/2017	Wire Transfer Fee	C	-15.00	
06/29/2017	WIRE TYPE:WIRE IN DATE: 170629 TIME:1539 ET [REDACTED] SEQ:48/001958...	C	10,000.00	
04/10/2017	Wire Transfer Fee	C	-15.00	
04/07/2017	WIRE TYPE:WIRE IN DATE: 170407 TIME:1201 ET [REDACTED] SEQ:29/000612...	C	8,000.00	
03/21/2017	Wire Transfer Fee	C	-15.00	
03/20/2017	WIRE TYPE:WIRE IN DATE: 170320 TIME:1127 ET [REDACTED]...	C	1,254.30	
03/13/2017	Wire Transfer Fee	C	-15.00	
03/10/2017	WIRE TYPE:WIRE IN DATE: 170310 TIME:1028 ET [REDACTED] SEQ:8/000143...	C	12,000.00	

**Mooresville Payroll: Account Activity**

Balance Summary:\$13,066.97 (available as of today 08/22/2018)

View:today 08/22/2018

**All Transactions**

Date	Description	Status	Amount	Available Balance
05/04/2018	WIRE TYPE: WIRE IN DATE: 180504 TIME: 1436 ET [REDACTED] SEQ: /001369...	C	5,000.00	

**SCHEDULE 4.2**

**Gold's Gym Mooresville****Payroll Summary for Kevin Craft**

01/01/2018 - 08/22/2018

Date	Name	Net Amt	Hours	Taxes Withheld	Total Deductions	Total Pay	Employer Taxes	Total Cost	Check Num
08/15/2018	Kevin Craft	\$2,159.10	86.67	\$695.07	\$0.00	\$2,854.17	\$264.29	\$3,118.46	4131
07/27/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$92.60	\$1,092.60	4099
07/13/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$92.60	\$1,092.60	4073
06/29/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$92.60	\$1,092.60	4048
06/15/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$92.60	\$1,092.60	4022
06/01/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$92.60	\$1,092.60	3995
05/18/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$92.60	\$1,092.60	3968
05/04/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$92.60	\$1,092.60	3940
04/20/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$97.10	\$1,097.10	DD
04/06/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$98.60	\$1,098.60	3908
03/23/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$98.60	\$1,098.60	DD
03/09/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$98.60	\$1,098.60	3875
02/23/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$98.60	\$1,098.60	3846
02/09/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$98.60	\$1,098.60	3810
01/26/2018	Kevin Craft	\$796.07	80.00	\$203.93	\$0.00	\$1,000.00	\$98.60	\$1,098.60	3781
01/12/2018	Kevin Craft	\$230.29	20.00	\$19.71	\$0.00	\$250.00	\$24.66	\$274.66	3752
	<b>Totals</b>	<b>\$13,781.24</b>	<b>1,226.67</b>	<b>\$3,322.93</b>	<b>\$0.00</b>	<b>\$17,104.17</b>	<b>\$1,625.85</b>	<b>\$18,730.02</b>	

**Mooresville: Account Activity**

Balance Summary:\$359.20 (available as of today 08/22/2018)

View:today 08/22/2018

**All Transactions**

Date	Description	Status	Amount	Available Balance
08/14/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-600.00	
08/10/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-35.00	
08/10/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-80.00	
08/10/2018	Online Banking transfer from CHK 1284 Confirmation# 193570145 [REDACTED]	C	50.00	
08/08/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-200.00	
08/06/2018	Online Banking transfer from CHK 1284 Confirmation# [REDACTED]	C	6.00	
07/18/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-1,000.00	
07/17/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-2,500.00	
07/12/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-850.00	
07/09/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-100.00	
07/05/2018	BARCLAYCARD US DES:CREDITCARD ID: [REDACTED] INDN:KEVIN CRAFT CO ID: [REDACTED] WEB	C	-1,284.59	
07/05/2018	Online Banking transfer from CHK 1284 Confirmation# [REDACTED]	C	250.00	
07/03/2018	Online Banking transfer from CHK 1284 Confirmation# [REDACTED]	C	1,500.00	
07/02/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-3,000.00	
06/28/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-500.00	

Date	Description	Document	Page 29 of 64	Status	Amount	Available Balance
06/28/2018	Online Banking transfer from CHK 1284 Confirmation# [REDACTED]			C	200.00	
06/25/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-240.00	
06/21/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-2,100.00	
06/19/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-750.00	
06/18/2018	Online Banking transfer from CHK 1284 Confirmation# [REDACTED]			C	150.00	
06/14/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-800.00	
06/07/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-1,200.00	
06/05/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-500.00	
05/23/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-1,000.00	
05/17/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-5,000.00	
05/15/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-200.00	
05/15/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-500.00	
05/10/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-200.00	
05/09/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-250.00	
05/01/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-200.00	
04/16/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-1,000.00	
04/12/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-1,000.00	
04/10/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-600.00	
04/02/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-600.00	

Date	Description	Document	Page 30 of 64	Status	Amount	Available Balance
03/26/2018	Online Banking transfer from CHK 1284 Confirmation# 1106081471			C	300.00	
03/20/2018	Online Banking transfer to CHK 1284 Confirmation# 2156950867			C	-2,500.00	
03/19/2018	Online Banking transfer to CHK 1284 Confirmation# 1318257913			C	-500.00	
03/19/2018	Online Banking transfer to CHK 1284 Confirmation# 1448244507			C	-2,500.00	
03/19/2018	Online Banking transfer from CHK 1284 Confirmation# 132158147			C	35.00	
03/19/2018	Online Banking transfer from CHK 1284 Confirmation# 130611352			C	50.00	
03/19/2018	Online Banking transfer from CHK 1284 Confirmation# 129032286			C	200.00	
03/14/2018	Online Banking transfer from CHK 1284 Confirmation# 106032620			C	2,000.00	
03/13/2018	Online Banking transfer from CHK 1284 Confirmation# 196529455			C	7,500.00	
03/13/2018	Online Banking transfer from CHK 1284 Confirmation# 196353521			C	8,000.00	
03/12/2018	Online Banking transfer from CHK 1284 Confirmation# 106090455			C	9,000.00	
03/09/2018	Online Banking transfer from CHK 1284 Confirmation# 1061158104			C	4,800.00	
03/07/2018	Online Banking transfer to CHK 1284 Confirmation# 6345075727			C	-400.00	
03/05/2018	Online Banking transfer to CHK 1284 Confirmation# 7129782058			C	-500.00	
03/01/2018	Online Banking transfer to CHK 1284 Confirmation# 7491222303			C	-300.00	
02/22/2018	Online Banking transfer from CHK 1284 Confirmation# 135030828			C	500.00	

**Mooresville: Account Activity**

Balance Summary: \$359.20 (available as of today 08/22/2018)  
 View: today 08/22/2018

**All Transactions**

Date	Description	Status	Amount	Available Balance
02/20/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-3,000.00	
02/14/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-100.00	
02/12/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-85.00	
02/12/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-150.00	
02/12/2018	Online Banking transfer from CHK 1284 Confirmation# [REDACTED]	C	100.00	
02/07/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-500.00	
02/06/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-100.00	
02/05/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-150.00	
02/01/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-400.00	
01/29/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-400.00	
01/29/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-300.00	
01/18/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-4,000.00	
01/17/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-1,000.00	
01/16/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-100.00	
01/08/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-350.00	

Date	Description	Document	Status	Amount	Available Balance
01/02/2018	Online Banking transfer to CHK 1284 Confirmation# 593301683		C	-1,000.00	
01/02/2018	Online Banking transfer to CHK 1284 Confirmation# 7484908609		C	-750.00	
12/19/2017	Online Banking transfer to CHK 1284 Confirmation# 9269040571		C	-5,000.00	
12/08/2017	Online Banking transfer to CHK 1284 Confirmation# 116081683		C	-500.00	
12/04/2017	Online Banking transfer to CHK 1284 Confirmation# 1041922966		C	-300.00	
12/01/2017	Online Banking transfer to CHK 1284 Confirmation# 1145034189		C	-200.00	
12/01/2017	Online Banking transfer to CHK 1284 Confirmation# 213455931		C	-1,100.00	
11/27/2017	Online Banking transfer to CHK 1284 Confirmation# 1380607726		C	-300.00	
11/27/2017	Online Banking transfer to CHK 1284 Confirmation# 5163169965		C	-200.00	
11/27/2017	Online Banking transfer from CHK 1284 Confirmation# 6481153075		C	75.00	
11/17/2017	Online Banking transfer to CHK 1284 Confirmation# 193270201		C	-4,000.00	
11/13/2017	Online Banking transfer from CHK 1284 Confirmation# 252032286		C	500.00	
10/26/2017	Online Banking transfer to CHK 1284 Confirmation# 1301741172		C	-5,000.00	
10/19/2017	Online Banking transfer to CHK 1284 Confirmation# 1144155933		C	-2,500.00	
10/18/2017	Online Banking transfer to CHK 1284 Confirmation# 1355992114		C	-1,000.00	
10/16/2017	Online Banking transfer from CHK 1284 Confirmation# 129971951		C	500.00	
10/06/2017	Online Banking transfer to CHK 1284 Confirmation# 1302534579		C	-2,000.00	
09/19/2017	Online Banking transfer to CHK 1284 Confirmation# 00003109249		C	-7,000.00	
09/11/2017	Online Banking transfer to CHK 1284 Confirmation# 1499131193		C	-200.00	

Date	Description	Document	Page 33 of 64	Status	Amount	Available Balance
09/07/2017	Online Banking transfer to CHK 1284 Confirmation# 258334005			C	-400.00	
09/01/2017	Online Banking transfer to CHK 1284 Confirmation# 258325620			C	-400.00	
09/01/2017	Online Banking transfer to CHK 1284 Confirmation# 258379949			C	-750.00	
09/01/2017	Online Banking transfer to CHK 1284 Confirmation# 258375177			C	-500.00	
08/31/2017	Online Banking transfer to CHK 1284 Confirmation# 25830155095			C	-175.00	
08/28/2017	Online Banking transfer to CHK 1284 Confirmation# 2583389892			C	-100.00	
08/28/2017	Online Banking transfer to CHK 1284 Confirmation# 2583083142			C	-250.00	
08/25/2017	Online Banking transfer to CHK 1284 Confirmation# 2583795946			C	-100.00	
08/24/2017	Online Banking transfer to CHK 1284 Confirmation# 258372496			C	-400.00	
08/22/2017	Online Banking transfer to CHK 1284 Confirmation# 2542841208			C	-500.00	
08/16/2017	Online Banking transfer to CHK 1284 Confirmation# 2582422252			C	-100.00	
08/16/2017	Online Banking transfer to CHK 1284 Confirmation# 258550502			C	-750.00	
08/09/2017	Online Banking transfer to CHK 1284 Confirmation# 258243832			C	-500.00	
08/07/2017	Online Banking transfer to CHK 1284 Confirmation# 258313768			C	-500.00	
08/02/2017	Online Banking transfer to CHK 1284 Confirmation# 2567886778			C	-1,000.00	
08/01/2017	Online Banking transfer from CHK 1284 Confirmation# 258042358			C	700.00	



## Mooresville: Account Activity

Balance Summary:\$359.20 (available as of today 08/22/2018)  
View:today 08/22/2018

### All Transactions

Date	Description	Status	Amount	Available Balance
07/27/2017	Online Banking transfer from CHK 1284 Confirmation# [REDACTED]	C	9,000.00	
07/25/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-400.00	
07/18/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-6,000.00	
07/17/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-100.00	
07/17/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-100.00	
07/14/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-200.00	
07/14/2017	Online Banking transfer from CHK 1284 Confirmation# [REDACTED]	C	130.00	
07/07/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-500.00	
07/06/2017	Online Banking transfer from CHK 1284 Confirmation# [REDACTED]	C	900.00	
06/23/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-250.00	
06/19/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-1,000.00	
06/14/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-400.00	
06/12/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-325.00	
06/01/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-1,000.00	
05/23/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-1,000.00	

Debtor	Prescriptive Nutrition & Fitness, LLC	18-50481
	Name	Case number (if known)

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

None

Creditor's name and address	Description of the property	Date	Value of property
5.1. Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ _____	_____	\$ _____
5.2. Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ _____	_____	\$ _____

**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ _____	_____	\$ _____
Last 4 digits of account number: XXXX- _____			

**Part 3: Legal Actions or Assignments**

**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

None

Case title	Nature of case	Court or agency's name and address	Status of case
7.1. First National Bank v. Prescriptive Nutrition	Breach of Contract	Iredell County Name _____ 226 Stockton St. Street _____	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number 18-CVS-1577	Receivership (filed before Receiver appointed over Debtor)	Statesville NC 28677 City _____ State _____ ZIP Code _____	
Case title 7.2. _____	Court or agency's name and address	Name _____ Street _____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number _____ _____		City _____ State _____ ZIP Code _____	

Prescriptive Nutrition & Fitness, LLC

16-30481  
Case number (if known) \_\_\_\_\_

## 8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

 None

<b>Custodian's name and address</b>	<b>Description of the property</b>	<b>Value</b>
<hr/> <b>Custodian's name</b> <hr/> <b>Street</b> <hr/> <hr/>	<hr/> <b>Case title</b> <hr/> <hr/>	<hr/> <b>Court name and address</b> <hr/> <hr/>
<b>City</b> _____ <b>State</b> _____ <b>ZIP Code</b> _____	<b>Case number</b> <hr/> <hr/>	<b>Name</b> <hr/> <b>Street</b> <hr/> <hr/>
	<b>Date of order or assignment</b> <hr/> <hr/>	<b>City</b> _____ <b>State</b> _____ <b>ZIP Code</b> _____

## **Part 4: Certain Gifts and Charitable Contributions**

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

 None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. Recipient's name			\$
Street			
City	State	ZIP Code	
<b>Recipient's relationship to debtor</b>			
9.2. Recipient's name			\$
Street			
City	State	ZIP Code	
<b>Recipient's relationship to debtor</b>			

## **Part 5: Certain Losses**

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Date of loss	Value of property lost
	<p>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</p> <p>List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</p>		\$ _____



Debtor Prescriptive Nutrition & Fitness, LLC  
Name \_\_\_\_\_

18-50481  
Case number (if known) \_\_\_\_\_

**13. Transfers not already listed on this statement**

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None

Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1. _____	_____	_____	\$ _____
<b>Address</b>			
Street _____	_____	_____	_____
City _____	State _____	ZIP Code _____	_____
<b>Relationship to debtor</b>			
13.2. _____	_____	_____	\$ _____
<b>Address</b>			
Street _____	_____	_____	_____
City _____	State _____	ZIP Code _____	_____
<b>Relationship to debtor</b>			

**Part 7: Previous Locations**

**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Address	Dates of occupancy		
14.1. Street _____	From _____ To _____		
City _____	State _____	ZIP Code _____	_____
14.2. Street _____	From _____ To _____		
City _____	State _____	ZIP Code _____	_____

Debtor

Prescriptive Nutrition & Fitness, LLC

Name

18-50481

Case number (if known)

### Part 8: Health Care Bankruptcies

#### 15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

No. Go to Part 9.

Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

15.1.

Facility name

Street

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

City State ZIP Code

Check all that apply:

- Electronically
- Paper

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

15.2.

Facility name

Street

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

City State ZIP Code

Check all that apply:

- Electronically
- Paper

### Part 9: Personally Identifiable Information

#### 16. Does the debtor collect and retain personally identifiable information of customers?

No.

Yes. State the nature of the information collected and retained. Billing information, address

Does the debtor have a privacy policy about that information?

No

Yes

#### 17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

No. Go to Part 10.

Yes. Does the debtor serve as plan administrator?

No. Go to Part 10.

Yes. Fill in below:

Name of plan

Employer identification number of the plan

EIN: \_\_\_\_\_

Has the plan been terminated?

No

Yes

Debtor Prescriptive Nutrition & Fitness, LLC

18-50481

Case number (if known)

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**

**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

None

Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1. Name _____ Street _____ _____	XXXX-_____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
City _____ State _____ ZIP Code _____				
18.2. Name _____ Street _____ _____	XXXX-_____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
City _____ State _____ ZIP Code _____				

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____ Street _____ _____	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
City _____ State _____ ZIP Code _____	<b>Address</b> _____	_____	
	_____	_____	

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____ Street _____ _____	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
City _____ State _____ ZIP Code _____	<b>Address</b> _____	_____	
	_____	_____	

Debtor Prescriptive Nutrition & Fitness, LLC Case number (if known) 18-50481

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**

**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

None

Owner's name and address	Location of the property	Description of the property	Value
Name _____	_____	_____	\$ _____
Street _____	_____	_____	_____
City _____ State _____ ZIP Code _____			

**Part 12: Details About Environmental Information**

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

No

Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number _____	Name _____	_____	<input type="checkbox"/> Pending
_____	Street _____	_____	<input type="checkbox"/> On appeal
_____	City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> Concluded

**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

No

Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____	_____	_____
Street _____	Street _____	_____	_____
_____	City _____ State _____ ZIP Code _____	_____	_____

Debtor Prescriptive Nutrition & Fitness, LLC Case number (if known) 18-50481

**24. Has the debtor notified any governmental unit of any release of hazardous material?**

No  
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____	_____	_____
Street _____ _____	Street _____ _____	_____	_____
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____	_____	_____

**Part 13: Details About the Debtor's Business or Connections to Any Business**

**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

None

	Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1.	Name _____ Street _____ _____	_____	EIN: _____ Dates business existed _____
	City _____ State _____ ZIP Code _____	_____	From _____ To _____
25.2.	Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	Name _____ Street _____ _____	_____	EIN: _____ Dates business existed _____
	City _____ State _____ ZIP Code _____	_____	From _____ To _____
25.3.	Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	Name _____ Street _____ _____	_____	EIN: _____ Dates business existed _____
	City _____ State _____ ZIP Code _____	_____	From _____ To _____

<p>Debtor</p> <p>Prescriptive Nutrition &amp; Fitness, LLC</p> <p>Name</p>	<p>18-50481</p> <p>Case number (if known)</p>																		
<p><b>26. Books, records, and financial statements</b></p> <p>26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.</p> <p><input type="checkbox"/> None</p> <table border="0"><tr><td style="width: 50%;"><b>Name and address</b></td><td style="width: 50%;"><b>Dates of service</b></td></tr><tr><td>26a.1. J. Scott Stewart Name 107 Treetop Lane Street</td><td>From <u>2002</u> To <u>2018</u></td></tr><tr><td>Troutman City</td><td>State ZIP Code</td></tr></table> <p><b>Name and address</b></p> <p>26a.2. Name Street City</p> <p>State ZIP Code</p> <p>26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.</p> <p><input type="checkbox"/> None</p> <table border="0"><tr><td style="width: 50%;"><b>Name and address</b></td><td style="width: 50%;"><b>Dates of service</b></td></tr><tr><td>26b.1. J. Scott Stewart Name 107 Treetop Lane Street</td><td>From <u>2002</u> To <u>2018</u></td></tr><tr><td>Troutman City</td><td>State ZIP Code</td></tr></table> <p><b>Name and address</b></p> <p>26b.2. Name Street City</p> <p>State ZIP Code</p> <p>26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.</p> <p><input type="checkbox"/> None</p> <table border="0"><tr><td style="width: 50%;"><b>Name and address</b></td><td style="width: 50%;"><b>If any books of account and records are unavailable, explain why</b></td></tr><tr><td>26c.1. J. Scott Stewart Name 107 Treetop Lane Street</td><td>_____ _____ _____</td></tr><tr><td>Troutman City</td><td>NC 28166 State ZIP Code</td></tr></table>		<b>Name and address</b>	<b>Dates of service</b>	26a.1. J. Scott Stewart Name 107 Treetop Lane Street	From <u>2002</u> To <u>2018</u>	Troutman City	State ZIP Code	<b>Name and address</b>	<b>Dates of service</b>	26b.1. J. Scott Stewart Name 107 Treetop Lane Street	From <u>2002</u> To <u>2018</u>	Troutman City	State ZIP Code	<b>Name and address</b>	<b>If any books of account and records are unavailable, explain why</b>	26c.1. J. Scott Stewart Name 107 Treetop Lane Street	_____ _____ _____	Troutman City	NC 28166 State ZIP Code
<b>Name and address</b>	<b>Dates of service</b>																		
26a.1. J. Scott Stewart Name 107 Treetop Lane Street	From <u>2002</u> To <u>2018</u>																		
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<b>Name and address</b>	<b>If any books of account and records are unavailable, explain why</b>																		
26c.1. J. Scott Stewart Name 107 Treetop Lane Street	_____ _____ _____																		
Troutman City	NC 28166 State ZIP Code																		

Debtor	Prescriptive Nutrition & Fitness, LLC	Case number (if known)	18-50481																				
	Name																						
<table border="0"><tr><td colspan="2"><b>Name and address</b></td><td><b>If any books of account and records are unavailable, explain why</b></td></tr><tr><td>26c.2.</td><td>Kevin Craft</td><td></td></tr><tr><td></td><td>Name 191B West Plaza</td><td></td></tr><tr><td></td><td>Street</td><td></td></tr><tr><td></td><td>Mooreville</td><td>NC</td><td>28117</td></tr><tr><td></td><td>City</td><td>State</td><td>ZIP Code</td></tr></table>				<b>Name and address</b>		<b>If any books of account and records are unavailable, explain why</b>	26c.2.	Kevin Craft			Name 191B West Plaza			Street			Mooreville	NC	28117		City	State	ZIP Code
<b>Name and address</b>		<b>If any books of account and records are unavailable, explain why</b>																					
26c.2.	Kevin Craft																						
	Name 191B West Plaza																						
	Street																						
	Mooreville	NC	28117																				
	City	State	ZIP Code																				
<p>26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.</p> <p><input checked="" type="checkbox"/> None</p>																							
<p><b>Name and address</b></p> <p>26d.1.</p> <p>Name</p> <p>Street</p> <p>City State ZIP Code</p>																							
<p><b>Name and address</b></p> <p>26d.2.</p> <p>Name</p> <p>Street</p> <p>City State ZIP Code</p>																							
<p>27. Inventories</p> <p>Have any inventories of the debtor's property been taken within 2 years before filing this case?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Give the details about the two most recent inventories.</p>																							
<b>Name of the person who supervised the taking of the inventory</b>		<b>Date of inventory</b>	<b>The dollar amount and basis (cost, market, or other basis) of each inventory</b>																				
<hr/>		<hr/>	\$ <hr/>																				
<p><b>Name and address of the person who has possession of inventory records</b></p> <p>27.1.</p> <p>Name</p> <p>Street</p> <p>City State ZIP Code</p>																							

Debtor

Prescriptive Nutrition & Fitness, LLC

18-50481

Name

Case number (if known)

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
_____	_____	\$ _____

Name and address of the person who has possession of inventory records

27.2.

Name	_____
Street	_____
City	State _____ ZIP Code _____

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Kevin Craft	126 Chandeleur Dr. Mooresville, NC 28117	Member / Manager	100
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

No

Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
_____	_____	_____	From _____ To _____
_____	_____	_____	From _____ To _____
_____	_____	_____	From _____ To _____
_____	_____	_____	From _____ To _____

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

No

Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1. Kevin Craft Name 126 Chandeleur Dr. Street	See Attached Schedule 30.1	_____	Salary
Mooresville City	NC State	28117 ZIP Code	_____
Relationship to debtor Member / Manager	_____	_____	_____

## SCHEDULE 30.1

## Gold's Gym Mooresville Payroll Summary for Kevin Craft

01/01/2018 - 08/22/2018

Date	Name	Net Amt	Hours	Taxes Withheld	Total Deductions	Total Pay	Employer Taxes	Total Cost	Check Num
08/15/2018	Kevin Craft	\$2,159.10	86.67	\$695.07	\$0.00	\$2,854.17	\$264.29	\$3,118.46	4131
07/27/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$92.60	\$1,092.60	4099
07/13/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$92.60	\$1,092.60	4073
06/29/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$92.60	\$1,092.60	4048
06/15/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$92.60	\$1,092.60	4022
06/01/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$92.60	\$1,092.60	3995
05/18/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$92.60	\$1,092.60	3968
05/04/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$92.60	\$1,092.60	3940
04/20/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$97.10	\$1,097.10	DD
04/06/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$98.60	\$1,098.60	3908
03/23/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$98.60	\$1,098.60	DD
03/09/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$98.60	\$1,098.60	3875
02/23/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$98.60	\$1,098.60	3846
02/09/2018	Kevin Craft	\$815.06	80.00	\$184.94	\$0.00	\$1,000.00	\$98.60	\$1,098.60	3810
01/26/2018	Kevin Craft	\$796.07	80.00	\$203.93	\$0.00	\$1,000.00	\$98.60	\$1,098.60	3781
01/12/2018	Kevin Craft	\$230.29	20.00	\$19.71	\$0.00	\$250.00	\$24.66	\$274.66	3752
	<b>Totals</b>	<b>\$13,781.24</b>	<b>1,226.67</b>	<b>\$3,322.93</b>	<b>\$0.00</b>	<b>\$17,104.17</b>	<b>\$1,625.85</b>	<b>\$18,730.02</b>	

**Mooresville: Account Activity**

Balance Summary: \$359.20 (available as of today 08/22/2018)  
 View: today 08/22/2018

**All Transactions**

Date	Description	Status	Amount	Available Balance
08/14/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-600.00	
08/10/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-35.00	
08/10/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-80.00	
08/10/2018	Online Banking transfer from CHK 1284 Confirmation# 1693570148 [REDACTED]	C	50.00	
08/08/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-200.00	
08/06/2018	Online Banking transfer from CHK 1284 Confirmation# 1348079950 [REDACTED]	C	6.00	
07/18/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-1,000.00	
07/17/2018	Online Banking transfer to CHK 1284 Confirmation# 7364165787 [REDACTED]	C	-2,500.00	
07/12/2018	Online Banking transfer to CHK 1284 Confirmation# 7240694463 [REDACTED]	C	-850.00	
07/09/2018	Online Banking transfer to CHK 1284 Confirmation# 9507661908 [REDACTED]	C	-100.00	
07/05/2018	BARCLAYCARD US DES:CREDITCARD ID:56770126 INDN:KEVIN CRAFT CO ID:2510407970 WEB [REDACTED]	C	-1,284.59	
07/05/2018	Online Banking transfer from CHK 1284 Confirmation# [REDACTED]	C	250.00	
07/03/2018	Online Banking transfer from CHK 1284 Confirmation# 7362681324 [REDACTED]	C	1,500.00	
07/02/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-3,000.00	
06/28/2018	Online Banking transfer to CHK 1284 Confirmation# 3122500101 [REDACTED]	C	-500.00	

Date	Description	Document	Page 49 of 64	Status	Amount	Available Balance
06/28/2018	Online Banking transfer from CHK 1284 Confirmation# [REDACTED]			C	200.00	
06/25/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-240.00	
06/21/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-2,100.00	
06/19/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-750.00	
06/18/2018	Online Banking transfer from CHK 1284 Confirmation# [REDACTED]			C	150.00	
06/14/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-800.00	
06/07/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-1,200.00	
06/05/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-500.00	
05/23/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-1,000.00	
05/17/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-5,000.00	
05/15/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-200.00	
05/15/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-500.00	
05/10/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-200.00	
05/09/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-250.00	
05/01/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-200.00	
04/16/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-1,000.00	
04/12/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-1,000.00	
04/10/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-600.00	
04/02/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-600.00	

Date	Description	Document	Page 50 of 64	Status	Amount	Available Balance
03/26/2018	Online Banking transfer from CHK 1284 Confirmation# 1186081471			C	300.00	
03/20/2018	Online Banking transfer to CHK 1284 Confirmation# 2156950887			C	-2,500.00	
03/19/2018	Online Banking transfer to CHK 1284 Confirmation# 1348247913			C	-500.00	
03/19/2018	Online Banking transfer to CHK 1284 Confirmation# 1348244507			C	-2,500.00	
03/19/2018	Online Banking transfer from CHK 1284 Confirmation# 1321581471			C	35.00	
03/19/2018	Online Banking transfer from CHK 1284 Confirmation# 1306111342			C	50.00	
03/19/2018	Online Banking transfer from CHK 1284 Confirmation# 129032286			C	200.00	
03/14/2018	Online Banking transfer from CHK 1284 Confirmation# 1105032620			C	2,000.00	
03/13/2018	Online Banking transfer from CHK 1284 Confirmation# 1196529455			C	7,500.00	
03/13/2018	Online Banking transfer from CHK 1284 Confirmation# 1196533521			C	8,000.00	
03/12/2018	Online Banking transfer from CHK 1284 Confirmation# 1186090455			C	9,000.00	
03/09/2018	Online Banking transfer from CHK 1284 Confirmation# 116261158104			C	4,800.00	
03/07/2018	Online Banking transfer to CHK 1284 Confirmation# 13345075727			C	-400.00	
03/05/2018	Online Banking transfer to CHK 1284 Confirmation# 1129782058			C	-500.00	
03/01/2018	Online Banking transfer to CHK 1284 Confirmation# 114912742303			C	-300.00	
02/22/2018	Online Banking transfer from CHK 1284 Confirmation# 11435030828			C	500.00	



## Mooresville: Account Activity

Balance Summary:\$359.20 (available as of today 08/22/2018)  
View:today 08/22/2018

### All Transactions

Date	Description	Status	Amount	Available Balance
02/20/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-3,000.00	
02/14/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-100.00	
02/12/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-85.00	
02/12/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-150.00	
02/12/2018	Online Banking transfer from CHK 1284 Confirmation# [REDACTED]	C	100.00	
02/07/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-500.00	
02/06/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-100.00	
02/05/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-150.00	
02/01/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-400.00	
01/29/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-400.00	
01/29/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-300.00	
01/18/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-4,000.00	
01/17/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-1,000.00	
01/16/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-100.00	
01/08/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-350.00	

Date	Description	Document	Page 52 of 64	Status	Amount	Available Balance
01/02/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-1,000.00	
01/02/2018	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-750.00	
12/19/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-5,000.00	
12/08/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-500.00	
12/04/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-300.00	
12/01/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-200.00	
12/01/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-1,100.00	
11/27/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-300.00	
11/27/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-200.00	
11/27/2017	Online Banking transfer from CHK 1284 Confirmation# [REDACTED]			C	75.00	
11/17/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-4,000.00	
11/13/2017	Online Banking transfer from CHK 1284 Confirmation# [REDACTED]			C	500.00	
10/26/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-5,000.00	
10/19/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-2,500.00	
10/18/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-1,000.00	
10/16/2017	Online Banking transfer from CHK 1284 Confirmation# [REDACTED]			C	500.00	
10/06/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-2,000.00	
09/19/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-7,000.00	
09/11/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]			C	-200.00	

Date	Description	Document	Page 53 of 64	Status	Amount	Available Balance
09/07/2017	Online Banking transfer to CHK 1284 Confirmation# 130533405			C	-400.00	
09/01/2017	Online Banking transfer to CHK 1284 Confirmation# 7529725620			C	-400.00	
09/01/2017	Online Banking transfer to CHK 1284 Confirmation# 327799489			C	-750.00	
09/01/2017	Online Banking transfer to CHK 1284 Confirmation# 3127751771			C	-500.00	
08/31/2017	Online Banking transfer to CHK 1284 Confirmation# 120155095			C	-175.00	
08/28/2017	Online Banking transfer to CHK 1284 Confirmation# 3885389892			C	-100.00	
08/28/2017	Online Banking transfer to CHK 1284 Confirmation# 3178888142			C	-250.00	
08/25/2017	Online Banking transfer to CHK 1284 Confirmation# 156785946			C	-100.00	
08/24/2017	Online Banking transfer to CHK 1284 Confirmation# 7459377396			C	-400.00	
08/22/2017	Online Banking transfer to CHK 1284 Confirmation# 2542841208			C	-500.00	
08/16/2017	Online Banking transfer to CHK 1284 Confirmation# 3497427252			C	-100.00	
08/16/2017	Online Banking transfer to CHK 1284 Confirmation# 1288550502			C	-750.00	
08/09/2017	Online Banking transfer to CHK 1284 Confirmation# 8129243832			C	-500.00	
08/07/2017	Online Banking transfer to CHK 1284 Confirmation# 2113113786			C	-500.00	
08/02/2017	Online Banking transfer to CHK 1284 Confirmation# 3567886778			C	-1,000.00	
08/01/2017	Online Banking transfer from CHK 1284 Confirmation# 260712358			C	700.00	

**Mooresville: Account Activity**

Balance Summary: \$359.20 (available as of today 08/22/2018)  
 View: today 08/22/2018

**All Transactions**

Date	Description	Status	Amount	Available Balance
07/27/2017	Online Banking transfer from CHK 1284 Confirmation# [REDACTED]	C	9,000.00	
07/25/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-400.00	
07/18/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-6,000.00	
07/17/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-100.00	
07/17/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-100.00	
07/14/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-200.00	
07/14/2017	Online Banking transfer from CHK 1284 Confirmation# [REDACTED]	C	130.00	
07/07/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-500.00	
07/06/2017	Online Banking transfer from CHK 1284 Confirmation# [REDACTED]	C	900.00	
06/23/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-250.00	
06/19/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-1,000.00	
06/14/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-400.00	
06/12/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-325.00	
06/01/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-1,000.00	
05/23/2017	Online Banking transfer to CHK 1284 Confirmation# [REDACTED]	C	-1,000.00	

## SCHEDULE 30.2

CHECKBOOK18-504818 Mindy Dec 2018 Filed 08/22/18 3 Entered 08/22/18 18:07:54 Desc Main Cash  
back Document Page 56 of 64

| Download

Error: Please try again later.



Custom date range

Start Date mm/dd/yyyy

End Date mm/dd/yyyy

File type

Select file type



Download transactions

NOTE:

1. Use Web Connect downloads to avoid downloading duplicate transactions.
2. Support for Quicken 2015 is no longer available, please upgrade to Quicken 2016 or above.
3. You can download up to 3,000 transactions at a time.

| Print this view

Date	Description	Type	Status	Amount	Available Balance
<b>Showing: FILTER_TOKEN</b>					
[Show all transactions]					
Show 08/06/2018	Online Banking Transfer Conf# 7655521, Simko	activity type transfer	C status type icon cleared Cleared. Select to mark activity type transfer -100.00 Online Banking Transfer Conf# 7655521, Simko as Reconciled	-100.00	0.00
Show 08/06/2018	Zelle Transfer Conf# 7655521, SIMKO, SUSAN	activity type transfer	C status type icon cleared Cleared. Select to mark activity type transfer 150.00 Zelle Transfer Conf# 7655521, SIMKO, SUSAN as Reconciled	150.00	0.00
Show 07/17/2018	Online Banking Transfer Conf# 7655521, Simko	activity type transfer	C status type icon cleared Cleared. Select to mark activity type transfer -500.00 Online Banking Transfer Conf# 7655521, Simko as Reconciled	-500.00	0.00
Show 07/16/2018	Online Banking Transfer Conf# 7655521, Simko	activity type transfer	C status type icon cleared Cleared. Select to mark activity type transfer -150.00 Online Banking Transfer Conf# 7655521, Simko as Reconciled	-150.00	0.00
Show 07/16/2018	Online Banking Transfer Conf# 7655521, Simko	activity type transfer	C status type icon cleared Cleared. Select to mark activity type transfer -400.00 Online Banking Transfer Conf# 7655521, Simko as Reconciled	-400.00	0.00
Show 07/02/2018	Online Banking Transfer Conf# 7655521, Simko	activity type transfer	C status type icon cleared Cleared. Select to mark activity type transfer -400.00 Online Banking Transfer Conf# 7655521, Simko as Reconciled	-400.00	0.00

Date	Description	Type	Document	Page 57 of 64	Desc Main Amount	Available Balance
Show 06/14/2018	Online Banking Transfer Conf# [REDACTED] Simko	activity type transfer		C status type icon cleared Cleared. Select to mark activity type transfer -300.00 Online Banking Transfer Conf# [REDACTED] Simko as Reconciled	-300.00	0.00
Show 06/06/2018	Online Banking Transfer Conf# [REDACTED] Simko	activity type transfer		C status type icon cleared Cleared. Select to mark activity type transfer -350.00 Online Banking Transfer Conf# [REDACTED] Simko as Reconciled	-350.00	0.00
Show 05/25/2018	Online Banking Transfer Conf# [REDACTED] Simko	activity type transfer		C status type icon cleared Cleared. Select to mark activity type transfer -300.00 Online Banking Transfer Conf# [REDACTED] Simko as Reconciled	-300.00	0.00
Show 05/17/2018	Online Banking Transfer Conf# [REDACTED] Simko	activity type transfer		C status type icon cleared Cleared. Select to mark activity type transfer -500.00 Online Banking Transfer Conf# [REDACTED] Simko as Reconciled	-500.00	0.00
Show 04/12/2018	Online Banking Transfer Conf# [REDACTED] Simko	activity type transfer		C status type icon cleared Cleared. Select to mark activity type transfer -500.00 Online Banking Transfer Conf# [REDACTED] Simko as Reconciled	-500.00	0.00
Show 04/10/2018	Online Banking Transfer Conf# [REDACTED] Simko	activity type transfer		C status type icon cleared Cleared. Select to mark activity type transfer -400.00 Online Banking Transfer Conf# [REDACTED] Simko as Reconciled	-400.00	0.00
Show 03/26/2018	Online Banking Transfer Conf# [REDACTED] Simko	activity type transfer		C status type icon cleared Cleared. Select to mark activity type transfer -275.00 Online Banking Transfer Conf# [REDACTED] Simko as Reconciled	-275.00	0.00
Show 03/06/2018	Online Banking Transfer Conf# [REDACTED] Simko	activity type transfer		C status type icon cleared Cleared. Select to mark activity type transfer -400.00 Online Banking Transfer Conf# [REDACTED] Simko as Reconciled	-400.00	0.00
Show 02/20/2018	Online Banking Transfer Conf# [REDACTED] Simko	activity type transfer		C status type icon cleared Cleared. Select to mark activity type transfer -300.00 Online Banking Transfer Conf# [REDACTED] Simko as Reconciled	-300.00	0.00
Show 01/17/2018	Online Banking Transfer Conf# [REDACTED] Simko	activity type transfer		C status type icon cleared Cleared. Select to mark activity type transfer -500.00 Online Banking Transfer Conf# [REDACTED] Simko as Reconciled	-500.00	0.00
Show 12/19/2017	Online Banking Transfer Conf# [REDACTED] Simko	activity type transfer		C status type icon cleared Cleared. Select to mark activity type transfer -1,000.00 Online Banking Transfer Conf# [REDACTED] Simko as Reconciled	-1,000.00	0.00
Show 10/10/2017	Online Banking Transfer Conf# [REDACTED] Simko	activity type transfer		C status type icon cleared Cleared. Select to mark activity type transfer -150.00 Online Banking Transfer Conf# [REDACTED] Simko as Reconciled	-150.00	0.00

Date	Description	Type	Document	Page 58 of 64	Desc	Main Amount	Available Balance
Show 09/25/2017	Online Banking Transfer Conf# [REDACTED] Simko	activity type transfer		C status type icon cleared Cleared. Select to mark activity type transfer -400.00 Online Banking Transfer Conf# [REDACTED] Simko as Reconciled		-400.00	0.00
Show 09/20/2017	Online Banking Transfer Conf# [REDACTED] Simko	activity type transfer		C status type icon cleared Cleared. Select to mark activity type transfer -150.00 Online Banking Transfer Conf# [REDACTED] Simko as Reconciled		-150.00	0.00
Show 07/06/2017	Online Banking Transfer Conf# [REDACTED] Simko	activity type transfer		C status type icon cleared Cleared. Select to mark activity type transfer -50.00 Online Banking Transfer Conf# [REDACTED] Simko as Reconciled		-50.00	0.00
Show 06/26/2017	Online Banking Transfer Conf# [REDACTED] Simko	activity type transfer		C status type icon cleared Cleared. Select to mark activity type transfer -300.00 Online Banking Transfer Conf# [REDACTED] Simko as Reconciled		-300.00	0.00
Show 06/19/2017	Online Banking Transfer Conf# [REDACTED] Simko	activity type transfer		C status type icon cleared Cleared. Select to mark activity type transfer -300.00 Online Banking Transfer Conf# [REDACTED] Simko as Reconciled		-300.00	0.00
Show 06/13/2017	Online Banking Transfer Conf# [REDACTED] Simko	activity type transfer		C status type icon cleared Cleared. Select to mark activity type transfer -300.00 Online Banking Transfer Conf# [REDACTED] Simko as Reconciled		-300.00	0.00
Show 05/22/2017	Online Banking Transfer Conf# [REDACTED] Simko	activity type transfer		C status type icon cleared Cleared. Select to mark activity type transfer -500.00 Online Banking Transfer Conf# [REDACTED] Simko as Reconciled		-500.00	0.00
Show 04/19/2017	Online Banking Transfer Conf# [REDACTED] Simko	activity type transfer		C status type icon cleared Cleared. Select to mark activity type transfer -1,000.00 Online Banking Transfer Conf# [REDACTED] Simko as Reconciled		-1,000.00	0.00

[Back to top](#)

## Icon legend

Type icons	Status icons
• Debit card	• Authorized
• Check	• Hold
• Bill pay	• Processing
• Deposit	• Cleared
• Withdrawal	• Insufficient funds
• Transfer	• Reconciled
• Keep the change	
• Bank charge	
• Virtual Card	
• Debit	
• Credit	

UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF NORTH CAROLINA  
STATESVILLE DIVISION

PRESCRIPTIVE NUTRITION & ) Chapter 11  
FITNESS, LLC *dba* Golds Gym of ) Case No. 18-50481  
Mooresville, )  
 )  
Debtor. )  
\_\_\_\_\_  
)

**VERIFICATION OF CREDITOR MATRIX**

The above-named Debtor hereby verifies that the list of creditors previously filed is true and correct to the best of his knowledge

\_\_\_\_\_  
8/22/2018  
Date

\_\_\_\_\_  
*/s/ Kevin Craft*  
Signature of Debtor

UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF NORTH CAROLINA  
STATESVILLE DIVISION

<b>PRESCRIPTIVE NUTRITION &amp;</b>	)	<b>Chapter 11</b>
<b>FITNESS, LLC <i>dba</i> Golds Gym of</b>	)	<b>Case No. 18-50481</b>
<b>Mooresville,</b>	)	
	)	
<b>Debtor.</b>	)	
	)	

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for Prescriptive Nutrition & Fitness, LLC in the above captioned action, certifies that the following is a corporation, other than the debtor or a governmental unit, that directly or indirectly owns 10% or more of any class of the corporation's equity interests, or states that there are no entities to report under FRBP 7007.1:

X NONE

Date: August 22, 2018

**SODOMA LAW, P.C.**

*/s/ John C. Woodman*  
John C. Woodman (NC Bar No. 42365)  
211 East Blvd.  
Charlotte, North Carolina 28203  
(704) 442-0000  
[jwoodman@sodomalaw.com](mailto:jwoodman@sodomalaw.com)  
*Counsel for the Debtor*

UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF NORTH CAROLINA  
STATESVILLE DIVISION

PRESCRIPTIVE NUTRITION &	)	Chapter 11
FITNESS, LLC <i>dba</i> Golds Gym of	)	Case No. 18-50481
Mooresville,	)	
	)	
Debtor.	)	
	)	

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**LIST OF EQUITY SECURITY HOLDERS**

Following is the list of the Debtor's equity security holders which is prepared in accordance with Bankruptcy Rule 1007(a)(3) for filing in this Chapter 11 case:

KEVIN CRAFT 127 Chandeleur Dr. Mooresville, NC 28117	Member	100%
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This the 22<sup>nd</sup> day of August, 2018.

**SODOMA LAW, P.C.**

*/s/ John C. Woodman*  
John C. Woodman (NC Bar No. 42365)  
211 East Blvd.  
Charlotte, North Carolina 28203  
(704) 442-0000  
[jwoodman@sodomalaw.com](mailto:jwoodman@sodomalaw.com)  
*Counsel for the Debtor*

## United States Bankruptcy Court

WESTERN District Of NORTH CAROLINA

**In re**

PREScriptive NUTRITION & FITNESS, LLC Case No. 18-50481

**Debtor**

Chapter 11

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept ..... \$ Standard Hourly Rates

Prior to the filing of this statement I have received . . . . . \$ 8,000.00

Balance Due . . . . . \$ \_\_\_\_\_

2. The source of the compensation paid to me was:

Debtor       Other (specify)      Kevin Craft

3. The source of compensation to be paid to me is:

Debtor  Other (specify) Kevin Craft

4.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
  - a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
  - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

The firm will file the required Fee Applications for approval of its ongoing services associated with its post-petition representation of the Debtor in this case.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

8/22/2018  
*Date*

/s/ John C. Woodman  
*Signature of Attorney*  
Sodoma Law, P.C.  
*Name of law firm*

**CORPORATE RESOLUTION**

I, the undersigned, being an Officer of **PRESCRIPTIVE NUTRITION & FITNESS, LLC.**, a North Carolina limited liability company (the "Company"), having corporate headquarters located at 191 B West Plaza, Mooresville, NC 28117, do hereby adopt the following resolutions by signing below to consent to action without holding a formal meeting the Company:

**RESOLVED**, that the filing by the Company of a petition for relief under chapter 11 of title 11, United States Code (the "Bankruptcy Code"), in the United States Bankruptcy Court for the Western District of North Carolina is approved *nun pro tunc*; and it is

**FURTHER RESOLVED**, that the managers of the Company are authorized, empowered, and directed to execute on behalf of the Company a petition for relief under chapter 11 of the Bankruptcy Code in the United States Bankruptcy Court for the Western District of North Carolina, and any affidavits, forms, schedules, application or any other pleadings or documents which are necessary or appropriate, including debtor-in-possession financing arrangements; and it is

**FURTHER RESOLVED**, that the retention on behalf of the Company of the law firm of Sodoma Law, P.C., upon such terms and conditions as the officers of the Company shall approve, to render legal services to, and to represent the Company in connection with such chapter 11 proceedings and other related matters in connection therewith, is authorized and approved; and it is

**FURTHER RESOLVED**, that any of the officers of the Company are each severally authorized to retain on behalf of the Company such other professionals as the officers of the Company deem necessary or appropriate, upon such terms and conditions as the officers of the Company shall approve, to render services to the Company in connection with such chapter 11 proceedings and with respect to other related matters in connection therewith; and it is

**FURTHER RESOLVED**, that any of the officers of the Company are authorized, empowered, and directed to take any and all further action and to execute and deliver any and all such further instruments and documents and to pay all such expenses (subject to bankruptcy court approval), where necessary or appropriate in order to carry out fully the intent and accomplish the purposes of the resolutions adopted herein; and it is

**FURTHER RESOLVED**, that all actions taken by the officers of the Company prior to the date hereof in connection with the reorganization of the Company or any matter related thereto, or by virtue of these resolutions, are hereby in all respects ratified, confirmed, and approved.

Dated: Charlotte, North Carolina

August 22, 2017

By: 

Print Name: Kevin B. Carter

Its: Manager